PAGE 1 / 12

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Other Than A	An Authorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Expedia Inc Politic	cal Action Commitee	;	
<u> </u>			
ADDRESS (number and stre	·	NE	
than previously reported. (ACC)	Bellevue		WA 98004
2. FEC IDENTIFICATION	ON NUMBER ▼	CITY ▲	STATE ▲ ZIP CODE ▲
C C00462879		3. IS THIS REPORT NEW (N) OR	AMENDED (A)
4. TYPE OF REPOR (Choose One) (a) Quarterly Reports	Report Due On:	Feb 20 (M2) May 20 (M5) Mar 20 (M3) Jun 20 (M6) Apr 20 (M4) Jul 20 (M7)	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Oct 20 (M10) Jan 31 (YE)
April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31	port (Q2) (C) 12-Day PRE-Elec Report fo		General (12G) Runoff (12R) Special (12S) The second representation of th
Year-End Re July 31 Mid- Report (Non- Year Only) (N Termination F (TER)	rear (d) 30-Day POST-Ele Report fo	` ′	Runoff (30R) Special (30S) in the State of
5. Covering Period	M M / D D / Y 01	2018 through 06	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have exami Type or Print Name of Tre	Pedigo, Amanda, ,	best of my knowledge and belief it is true,	ue, correct and complete.
Signature of Treasurer	Pedigo, Amanda, , ,	[Electronically Filed]	Date 07 12 2018
NOTE: Submission of false,	erroneous, or incomplete in	formation may subject the person signing t	his Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SHMMARY PAGE

FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Expedia Inc Political Action Com	mitee	
Report Covering the Period: From:	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2018		110523.91
(b) Cash on Hand at Beginning of Reporting Period	112358.69	
(c) Total Receipts (from Line 19)	7549.22	15098.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	119907.91	125622.35
7. Total Disbursements (from Line 31)	7176.35	12890.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	112731.56	112731.56
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multi-	ticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530	

Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Expedia Inc Political Action Commitee

01 2018 06 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 7549.22 15098.44 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 15098.44 7549.22 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 15098.44 7549.22 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 15098.44 12, 13, 14, 15, 16, 17, and 18(c))......▶ 7549.22 20. Total Federal Receipts 7549.22 15098.44 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal		Cartinal Italia Pato			
Activity (from Schedule H4)	222				
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating					
Expenditures	2000.00	2000.00			
(c) Total Operating Expenditures					
(add 21(a)(i), (a)(ii), and (b))▶	2000.00	2000.00			
Transfers to Affiliated/Other Party Committees	0.00	0.00			
Contributions to	0.00	0.00			
Federal Candidates/Committees and Other Political Committees	4000.00	9500.00			
Independent Expenditures	400.00	45 45 45			
(use Schedule E)	0.00	0.00			
Coordinated Party Expenditures (52 U.S.C. § 30116(d))					
(use Schedule F)	0.00	0.00			
	4 4	45 45 45			
Loan Repayments Made	0.00	0.00			
Loans Made Refunds of Contributions To:	0.00	0.00			
(a) Individuals/Persons Other					
Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	0.00	0.00			
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds	, , , , ,	7 7			
(add Lines 28(a), (b), and (c))	0.00	0.00			
(434 200 20(4), (5), 44 (6),	0.00	0.00			
Other Disbursements (Including					
Non-Federal Donations)	1176.35	1390.79			
		4 4			
Federal Election Activity (52 U.S.C. § 30101(2	0))				
(a) Allocated Federal Election Activity					
(from Schedule H6) (i) Federal Share	0.00	0.00			
(i) I ederal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid	0.00	0.00			
Entirely With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add					
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
	4	4 4			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7176.35	12890.79			
	4 4	4			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	7176.35	12890.79			

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 7549.22 15098.44 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 15098.44 7549.22 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 2000.00 2000.00 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 2000.00 2000.00 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

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(0	che	ck only	or	ne)					
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		13		14		15	16	6	17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Expedia Inc Political Action Committee** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dzielak, Robert, J, , Date of Receipt Mailing Address 2800 NE 68th Street 2018 17 City Zip Code State Transaction ID: SA11AI.5083 WA Seattle 98115 Amount of Each Receipt this Period FEC ID number of contributing 1330.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Associate General Counsel Expedia, Inc. Payroll deduction for 7 pay periods - \$190 per period Receipt For: Aggregate Year-to-Date ▼ Primary General 2660.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Erskine, Fran, , , Date of Receipt Mailing Address 7513 NE 195 Street 2018 City State Zip Code Transaction ID: SA11AI.5084 WA Kenmore 98028 Amount of Each Receipt this Period FEC ID number of contributing 280.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Expedia, Inc. Payroll deduction for 7 pay periods - \$40 per period **VP Tax** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 560.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Greyber, Rob, , , Date of Receipt Mailing Address 1005 East Blaine Street 17 2018 City Zip Code State Transaction ID: SA11AI.5089 WA Seattle 98102 Amount of Each Receipt this Period FEC ID number of contributing C 1330.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction for 7 pay periods - \$190 per period Expedia, Inc. (Egencia) President, Egencia Receipt For: Aggregate Year-to-Date ▼ Primary General 2660.00 Other (specify) 2940.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

12 FOR LINE NUMBER: PAGE 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Expedia Inc Political Action Committee** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moodey, John, Tucker, , Date of Receipt Mailing Address 3039 92nd Avenue NE 2018 City Zip Code State Transaction ID: SA11AI.5090 WA Clyde Hill 98004 Amount of Each Receipt this Period FEC ID number of contributing C 1330.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **SVP Customer Operations** Expedia, Inc. Payroll deduction for 7 pay periods - \$190 per period Receipt For: Aggregate Year-to-Date ▼ Primary General 2660.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Morrey, John, , , Date of Receipt Mailing Address 2156 NE Morgan Lane 2018 City State Zip Code Transaction ID: SA11AI.5086 WA Issaguah 98029 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Expedia, Inc. VP Merchandising & Site Optimize Payroll deduction for 7 pay periods - \$50 per period Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Okerstrom, Mark, , , Date of Receipt Mailing Address 3804 E Blaine St 17 2018 City Zip Code State Transaction ID: SA11AI.5087 WA Seattle 98112 Amount of Each Receipt this Period FEC ID number of contributing C 1330.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction for 7 pay periods - \$190 per period EVP, Chief Financial Officer Expedia, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2660.00 Other (specify) 3010.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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		13		14		15	16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Expedia Inc Political Action Committee** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schultze, Gregory, , , Date of Receipt Mailing Address 932 Westhaven Dr. 2018 17 City Zip Code State Transaction ID: SA11AI.5085 44236 OH Hudson Amount of Each Receipt this Period FEC ID number of contributing C 1330.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Americas Strategic Accounts Expedia, Inc. Payroll deduction for 7 pay periods - \$190 per period Receipt For: Aggregate Year-to-Date ▼ Primary General 2660.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Tratt, Noah, , Date of Receipt Mailing Address 2205 22nd Ave E 2018 City State Zip Code Transaction ID: SA11AI.5088 WA Seattle 98112 Amount of Each Receipt this Period FEC ID number of contributing 269.22 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Expedia, Inc. VP, Expedia Media Solutions Payroll deduction for 7 pay periods - \$38.46 per period Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 538.44 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1599.22 SUBTOTAL of Receipts This Page (optional)..... 7549.22

S 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) EXPEDIA IN POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) City State Zip Code (Sategory) Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code State Zip Code Felt Mame (Last, First, Middle Initial) B. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) B. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) B. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mame (Last, First, Middle Initial) C. Mailing Address City State Zip Code Felt Mailing Address City State Zip Code Felt Mailing Address City State Zip Code Felt Mailing Address City Stat	SCHEDULE B (FEC Form 3X)									- 12
Detailed Summary Page 28 28 28 20 20 300	ITEMIZED DISBURSEMENTS			(check	only o	one)				
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for for commercial purposes, other than using the name and address of sny political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full)					L					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pull) Expedia Inc Political Action Committee Full Name (Last, Frist, Middle Initial) City City City City Candidate Name Candidate Name GRAVES FOR CONGRESS Office Sought: I House District: City State City State City City Candidate Name City State City Candidate Name City State City Candidate Name City Ca	Any information copied from such Reports and State	ments may	not be sold or use							ns
Expedia Inc Political Action Committee Full Name (Last, First, Middle Initial) A. GRAVES FOR CONGRESS Mailing Address 2945 GRAND, SUITE 2400 City State Zip Code KANSAS CITY MO E4108 Purpose of Disbursement 2018 Primary General Other (specify) Primary Grandfate Name City State: MO District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City State: District: Dist										
Full Name (Last, First, Middle Initial) A GRAVES FOR CONGRESS Mailing Address 2345 GRAND, SUITE 2400 City State MO E4108 Purpose of Disbursement Z019 Pinnary General Purpose of Disbursement Total State: Date of Disbursement Date Date of Disbursement Date Date of Disbursement Date Date Date Date Date Date Date Dat	1 \									
A. GRAVES FOR CONGRESS Mailing Address 2345 GRAND, SUITE 2400 City City City Candidate Name GRAVES FOR CONGRESS Office Sought:	Expedia Inc Political Action Comm	nitee								
City City KANSAS CITY Purpose of Disbursement 2000.00 Category' Full Name (Last, First, Middle Initial) B. Candidate Name Candidate						D-44	Distrum			
Mailing Address 2345 GRAND, SUITE 2400 City Purpose of Disbursement 2016 Primary State: Disbursement Candidate Name City Purpose of Disbursement State: Disbursement Candidate Name Office Sought:	A. GRAVES FOR CONGRESS									
KANAS CITY	Mailing Address 2345 GRAND, SUITE 2400									
RANAS CITY						FEC Ide	entificatio	n Number	ı	
2018 Primary Candidate Name GRAVES FOR CONGRESS Office Sought:		МО	64108							
Cardidate Name GRAVES FOR CONGRES Office Sought: V				· · ·						
GRAVES FOR CONGRESS Office Sought:	Candidate Name	Category/								eriod
Senate President Other (specify) State: MO District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House President President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Financy General Other (specify) Date of Disbursement this Period Type Office Sought: House Primary General Other (specify) Mailing Address City State Zip Code FEC Identification Number Category/ Type Date of Disbursement this Period Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House Senate President Candidate Name Office Sought: House President Category/ Type Office Sought: House President Category/ Type Office Sought: House President State: District: General Other (specify) Memo Item Substotal of Disbursement this Period Memo Item Substotal of Disbursements This Page (optional)					,	-				
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State: MO District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City										
Mailing Address City State Zip Code FEC Identification Number Candidate Name Office Sought: House President Primary General Primary General City State Zip Code Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Category/ Type Disbursement For: Memo Item FEC Identification Number Category/ Type Date of Disbursement this Period Fell Name (Last, First, Middle Initial) Category/ Type Office Sought: House Primary General Other (specify) FEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) Memo Item Substortal of Disbursements This Page (optional)	State: MO District: 06	, , ,	3, v			Me	mo Item			
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Primary General Other (specify) Date of Disbursement Candidate Name Candidate Name City State Zip Code Primary General Category/ Type Category/ Type Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement Category/ Type Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substortal of Disbursement This Page (optional)										
City Purpose of Disbursement Candidate Name Office Sought: House	В.									
City State Zip Code FEC Identification Number Candidate Name Candidate Name Disbursement For: Senate Primary General State: District: District: Disbursement For: Mailing Address City State Zip Code FEC Identification Number Category/ Type FEC Identification Number Category/ Type Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Disbursement For: Senate Primary General Other (specify) Memo Item FEC Identification Number Category/ Type Memo Item State: District: Memo Item State: Disbursement For: Senate Primary General Other (specify) Memo Item Memo Item Substitute State: Disbursements This Page (optional)	Mailing Address					_				1
Purpose of Disbursement Candidate Name Category/ Office Sought:										
Candidate Name Category/ Type	City	State	Zip Code			FEC Ide	entificatio	n Number		
Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Full Name (Last, First, Middle Initial) C. City State Zip Code FEC Identification Number Candidate Name Category/ Type Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) State: District: Substoctant Disbursement this Period Memo Item Substoctant Disbursement this Period Memo Item Substoctant Disbursement This Page (optional)	Purpose of Disbursement					C				
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Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)	C.					Date of	Disburse	ement		
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Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name				y/	Amount	of Each	Disburser	ment this Pe	riod
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 10 OF 12						
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only							
	Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and Statem	ante may not be cold or us								
or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)									
Expedia Inc Political Action Commi	tee								
Full Name (Last, First, Middle Initial)									
^{A.} DEBBIE LESKO FOR CONGRESS	5		Date of Disbursement						
Mailing Address PO BOX 45388			04 24 2018						
Cit.	Nata Zin Cada								
City S PHOENIX	AZ 85064		FEC Identification Number						
Purpose of Disbursement			C C00663914						
		L II							
Candidate Name		Category/	Amount of Each Disbursement this Period						
0.00		Туре	1000 00						
			7						
President	,		Memo Item						
_	3		Date of Disbursement						
DEBBIE ELONO I ON CONCRECC	,		M M / D D / Y Y Y Y						
Mailing Address PO BOX 45388			05 31 2018						
City	'		FEC Identification Number						
PHOENIX	AZ 85064								
2018 Primary									
Candidate Name		Catagony							
Debbie Lesko for congress		Type	Amount of Lacif Disbursement this Fellou						
Office Sought: House Disburser	nent For: 2018		1000.00						
	•								
	Other (specify)		Memo Item						
	ittee		Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address			05 22 2018						
City	State Zip Code		FEC Identification Number						
Purpose of Disbursement			C C00671891						
			Transaction ID : SB23.5124						
Candidate Name	NI COMMITTEE	Category/	Amount of Each Disbursement this Period						
O#: 0	I	туре	2000.00						
Consts			4 4						
	·		Memo Item						
State: FL District: 17			LI Monto Rom						
CURTOTAL of District and This Days (and	Address PO BOX 45388 State								
SUBTUTAL OF DISpursements This Page (optional)		······	1000.00						
TOTAL This Period (last page this line number only).			4000.00						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate sche		FOR LINE NUMBER: PAGE 11 OF 12 (check only one)			
	Detailed Summary	Page	21b 28a			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) Expedia Inc Political Action Commi						
Full Name (Last, First, Middle Initial) A. Bank of America				Date of Disbursement		
Mailing Address 100 North Tryon Street	04 16 2018					
Charlotte	State Zip Coo NC 28202			FEC Identification Number		
Purpose of Disbursement Bank Fee Candidate Name	Catagony/	Transaction ID : SB29.5113 Amount of Each Disbursement this Period				
Office Sought: House Disburser			Category/ Type	57.16		
Senate President State: District:	Other (specify) ▼	eneral		Memo Item		
Full Name (Last, First, Middle Initial) B. Bank of America				Date of Disbursement		
Mailing Address 100 North Tryon Street				05 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Charlotte	State Zip Coo NC 28202			FEC Identification Number		
Purpose of Disbursement Bank Fee				C Transaction ID : SB29.5091		
Candidate Name Office Sought: House Disburser	mont For	C	Category/ Type	Amount of Each Disbursement this Period 59.89		
Senate		eneral				
State: District:				Memo Item		
Full Name (Last, First, Middle Initial) C. Bank of America				Date of Disbursement		
Mailing Address 100 North Tryon Street				06 15 2018		
City Charlotte Purpose of Disbursement Bank Fee	State Zip Coo NC 28202			FEC Identification Number		
Candidate Name			Category/ Type	Transaction ID : SB29.5112 Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate President State: District:		eneral		59.30 Memo Item		
SUBTOTAL of Disbursements This Page (optional)				176.35		
TOTAL This Period (last page this line number only))					

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	I llaa aanarata aahadula(a) I			OR LINE NUMBER: PAGE 12 OF 12 Check only one)			
		Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) Expedia Inc Political Action Commi	itee						
Full Name (Last, First, Middle Initial) A. JASON SMITH FOR CONGRESS	Date of Disbursement						
Mailing Address PO BOX 1324	05 04 2018						
City CAPE GIRARDEAU		FEC Identification Number					
Purpose of Disbursement 2019 Primary				C C00541862 Transaction ID : SB29.5099			
Candidate Name JASON SMITH FOR CONGRESS			Category/ Type	Amount of Each Disbursement this Period			
Senate x	nent For: 2 Primary Other (spec	General		1000.00 Memo Item			
State: MO District: 08 Full Name (Last, First, Middle Initial)				INIGHIO ILEHII			
3.		Date of Disbursement					
Mailing Address							
,	State	Zip Code		FEC Identification Number			
Purpose of Disbursement				C			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursen Senate President	General		Memo Item				
State: District: Full Name (Last, First, Middle Initial)							
C				Date of Disbursement			
Mailing Address							
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement Candidate Name	Amount of Each Disbursement this Period						
Office Sought: House Disbursen	ment For:		Туре				
Senate President State: District:		Memo Item					
				1000.00			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				1176.35			